

MOVE-IN/MOVE-OUT CHECKLIST – SAMPLE

MOVE-IN/MOVE-OUT CHECKLIST – SAMPLE					
		Condition Code		Cleanliness Code	
Original to tenant		C = Clean	B = Broken	C = Clean	
Copy to First Nation		DT = Dry	S = Scratched /marked	DT = Dry	
				ST = Stained	
Unit no.:		<i>Move-in date:</i>		<i>Move-out date:</i>	
Tenant Name		<u>Condition at beginning of tenancy</u>		<u>Condition at end of tenancy</u>	
Area	Item	Comment	Code	Comment	Code
Kitchen	Ceiling				
	Walls and trims				
	Floor				
	Countertop				
	Cabinet and doors				
	Stove				
	Stove serial #				
	Oven				
	Stovetop				
	Boiler pan				
	Sink and stoppers				
	Fridge				
	Fridge serial #				
	Crisper				
	Ice trays				
	Freezer				
	Closets				
	Dishwasher				
	Dishwasher serial #				
	Lighting fixtures				
	Window screens				

Tenant Name		<u>Condition at beginning of tenancy</u>		<u>Condition at end of tenancy</u>	
Area	Item	Comment	Code	Comment	Code
Living Room	Ceiling				
	Walls and trims				
	Floor				
	Air conditioner				
	Air conditioner cover				
	Air cleaner				
	TC cable				
	TC adapter				
	Closets				
	Light fixtures				
	Window screens				
	Dining room	Ceiling			
Walls and trims					
Floor					
Closets					
Light fixtures					
Window screens					
Stairwell and hall	Treads and landing				
	Walls and trims				
	Ceiling				
	Closets				
	Light fixtures				
	Window screens				
Bathroom	Ceiling				
	Walls and trims				
	Cabinets and mirrors				
	Tub, sink, toilet				
	Door				
	Light fixtures				
	Window screens				
	Shower doors				
	Tub surround				

Tenant Name		<u>Condition at beginning of tenancy</u>		<u>Condition at end of tenancy</u>	
Area	Item	Comment	Code	Comment	Code
Interior rooms	Ceiling				
	Walls and trims				
	Floor/ baseboards/ carpet				
	Closet(s)				
	Doors				
	Lighting fixtures/ceiling Fan/bulbs				
	Windows/ coverings/ screens				
	Electrical outlets				
Exterior	Patio doors				
	Garbage container(s)				
	Glass and frames				
	Screens				
	Storm doors				
	Windows				
	Stucco or siding				
	Grounds				
	Walkways				
	Stairs and stairwell				
	Walls				
Basement	Floor				
	Furnace				
	Hot water heater				
	Plumbing				
	Electrical				
	Light fixtures				
	Washing machine				
	Washing Machine Serial #				
	Dryer				
	Dryer serial #				
Utility room	Water pump				
	Sump pump				
	Sewage pump				
Keys	# of keys =				

Repairs to be completed on initial occupancy

List repairs

Charges	\$	<i>The undersigned tenant(s) certifies/certify that she/he/they has/have inspected the above-mentioned unit and has/have found the suite and its contents to be in the condition indicated. She/he/they understand(s) that any future damage that occurs in this unit shall be rectified at her/his/their expense through direct billing or security deposit deduction.</i>
Cleaning floors, walls cupboards, windows and fixtures:		<i>Incoming</i> Inspector/housing manager's signature: _____
Machine-cleaning carpets:		
Cleaning stove, fridge and other appliances:		Tenant's signature: _____
Repairs as follows:		<i>Outgoing</i> Inspector/housing manager's signature: _____ Tenant's signature:

TOTAL		
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Tenant's move-out forwarding address (to forward deposits)

Street address			
City/province		Postal code	